APPLICATION FOR CONTRACTOR LICENSE/REGISTRATION CITY OF COLLEGE STATION

1101 TEXAS AVENUE – COLLEGE STATION, TX 77840 (979) 764-3570 - (979) 764-3496 FAX WWW.CI.COLLEGE-STATION.TX.US

ELECTRICAL CONTRACTOR

COMPANY NAME:		
LICENSE HOLDER:		
ADDRESS LINE 1:		
ADDRESS LINE 2:		
CITY:	STATE:	ZIP CODE:
PHONE:	MOBILE:	
FAX:	PAGER:	
EMAIL:		
Are there any other person(s) you authorize to apply for permi	ts and inspections?
certify that the above statem \$50.00 and the processing	nents are true and correct. I und fee of \$4.00 are non-refundab	Contractor License/Registration. I erstand that the application fee of ole. I further understand that the n the revocation of this license by
Signature of Applicant:		_ Date:
* * * * * * * * * * * * * * * * * * * *	Official Use Only	•••••
City Of College Station Numb	per:	_ Exp. Date:
State License Number:		_ Exp. Date:
Billing Information: Tax	ID# Soc.	Sec. #
Issued by:		